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## BIB DATA SHEET

CONFIRMATION NO. 5352

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/757,077	01/14/2004 RULE	530	1649	17355CIP3(BOT)
<b>APPLICANTS</b> Lance E. Steward, Irvine, CA; Ester Fernandez-Salas, Fullerton, CA; Todd M. Herrington, Brookline, MA; Kei Roger Aoki, Coto de Caza, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/163,106 06/04/2002 which is a CIP of 09/910,346 07/20/2001 ABN which is a CIP of 09/620,840 07/21/2000 PAT 6,903,187 (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/04/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /ROBERT CLINTON HAYES/ Acknowledged <u>Examiner's Signature</u>	<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 36	<b>TOTAL CLAIMS</b> 44
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> ALLERGAN, INC. 2525 DUPONT DRIVE, T2-7H IRVINE, CA 92612-1599 UNITED STATES				
<b>TITLE</b> Modified Botulinum Neurotoxins				
<b>FILING FEE RECEIVED</b> 2298	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit